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RCE/1600A ✓

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TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/614,790	
	Filing Date	July 12, 2000	
	First Named Inventor	Sharon F. Kleyne	
	Group Art Unit	1619	
	Examiner Name	Michael Willis	
Total Number of Pages in this Submission	58*	Attorney Docket Number	HME/7982.0001

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee transmittal form <input checked="" type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Amendment <input checked="" type="checkbox"/> After Final/ Response <input checked="" type="checkbox"/> Affidavits/Declaration(s) (3) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified copy of Priority Documents <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing Related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosures (identify below) Request for Continued Examination CD as attachment to Declaration of Dr. Philip Paden
Remarks: * = plus CD		

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT	
Firm or Individual Name	Howard Eisenberg, Esq. 2206 Applewood Court Perkasie, Pennsylvania 18944
Signature	
Date	January 30, 2004

CERTIFICATE OF MAILING			
I hereby certify that, on the date shown below, this correspondence is being deposited with the United States Postal Service in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, <input checked="" type="checkbox"/> with sufficient postage as first class mail <input type="checkbox"/> as "Express Mail Post Office to Addressee" - mailing label no. _____			
Type or print name	Howard Eisenberg		
Signature		Date	January 30, 2004

PE JC102
FEB 02 2004
NT & TRADE

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete If Known

Application Number 09/614,790
Filing Date July 12, 2000
First Named Inventor Sharon F. Kleyne
Examiner Name Michael Willis

☒ Applicant claims small entity status. See 37CFR 1.27

Art Unit 1619

TOTAL AMOUNT OF PAYMENT \$385

Attorney Docket No. HME/7982.0001

METHOD OF PAYMENT (check all that apply)

☒ Check ☐ Credit Card ☐ Money Order ☐ Other ☐ None

☐ Deposit Account

Deposit Account Number

50-1773

Deposit Account Name

Howard Eisenberg

The Commissioner is authorized to: (check all that apply)

☒ Charge fees indicated below ☒ Credit any overpayments

☐ Charge any additional fee(s) during the pendency of this application

☐ Charge any fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION

1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Code (\$)	Code (\$)		
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			\$0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
15 - 43	**= 0	x 9	= 0
Indep. Claims 2 - 5	**= 0	x 43	= 0
Multiple Dependent			

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1202 18	2202 9	Claims in excess of 20	
1201 86	2201 43	Independent claims in excess of 3	
1203 290	2203 145	Multiple dependent claim, if not paid	
1204 86	2204 43	**Reissue independent claims over original patent	
1205 18	2205 9	*Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			\$0

**or number of previously paid, if greater. For reissues, see above.

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid
1051	130	2051	65	Surcharge - late filing fee or oath	
1052	50	2052	25	Surcharge-late provisional filing fee or cover sheet	
1053	130	1053	130	Non-English specification	
1812	2,520	1812	2,520	For filing a request for ex-parte reexamination	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
1251	110	2251	55	Extension for reply within first month	
1252	420	2252	210	Extension for reply within second month	
1253	950	2253	475	Extension for reply within third month	
1254	1,480	2254	740	Extension for reply within fourth month	
1255	2,010	2255	1,005	Extension for reply within fifth month	
1401	330	2401	165	Notice of Appeal	
1402	330	2402	165	Filing a brief in support of an appeal	
1403	290	2403	145	Request for oral hearing	
1451	1,510	1451	1,510	Petition to institute a public use proceeding	
1452	110	2452	55	Petition to revive - unavoidable	
1453	1,330	2453	665	Petition to revive - unintentional	
1501	1,330	2501	665	Utility issue fee (or reissue)	
1502	480	2502	240	Design issue fee	
1503	640	2503	320	Plant issue fee	
1460	130	1460	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)	
1806	180	1806	180	Submission of Information Disclosure Stmt.	
8021	40	8021	40	Recording each patent assignment per property (times no. of properties) - total assignments 1	
1809	770	2809	385	Filing a submission after final rejection (37 C.F.R. 1.129(a))	
1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1801	770	2801	385	Request for Continued Examination (RCE)	385
1802	900	1802	900	Request for expedited examination of a design application	

Other fee (specify)

* Reduced by Basic Filing Fee Paid

SUBTOTAL (3) \$385

SUBMITTED BY

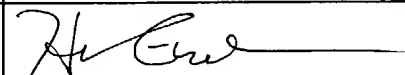
Complete (if applicable)

Name (print type) Howard Eisenberg, Esq.

Registration No. 36,789

Telephone (215) 453-9237

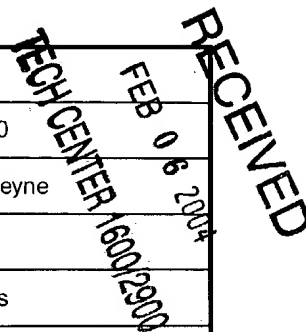
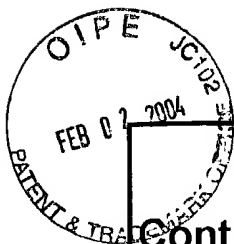
Signature



Date

January 30, 2004

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Request FOR Continued Examination (RCE) TRANSMITTAL Address to: Commissioner for Patents Mail Stop RCE P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	09/614,790
	Filing Date	July 12, 2000
	First Named Inventor	Sharon F. Kleyne
	Art Unit	1619
	Examiner Name	Michael Willis
	Attorney Docket No.	HME/7982.0001

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

1. Submission required under 37 CFR 1.114

a. ☒ Previously submitted

i. ☐ Consider the amendment(s) / reply under 37 CFR 1.116 previously filed on _____
(Any unentered amendment(s) referred to above will be entered)

ii. ☒ Consider the arguments in the Appeal Brief or Reply Brief previously filed on 9/24/02 & 1/13/03

iii. ☐ Other _____

b. ☒ Enclosed

i. ☒ Amendment/Reply

ii. ☒ Affidavits(s)/Declaration(s)

iii. ☐ Information Disclosure Statement (IDS)

iv. ☐ Other _____

2. Miscellaneous

a. ☐ Suspension of action on the above identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(h) required)

b. ☐ Other _____

3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

a. ☒ The Director is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account No. 50-1773

i. ☐ RCE fee required under 37 CFR 1.17(e).

ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)

iii. ☐ Other _____

b. ☒ Check in the amount of \$385.00 enclosed.

c. ☐ Payment by credit card. (Form PTO-2038 enclosed.)

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT REQUIRED

Name (Print/Type)	Howard Eisenberg, Esq.	Registration No.	36,789
Signature		Date	January 30, 2004

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commission for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type)	Howard Eisenberg	Date	January 30, 2004
Signature			

02/23/2004 ESHYAS11 000000050 03614790

385.00 DP

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Atty Doc. No. HME/7982.001

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

PATENT APPLICATION EXAMINING OPERATIONS

In re the Application of Sharon F. Kleyne : Group Art Unit: 1619
Serial No. 09/614,790 : Examiner: Michael Willis
Filed: July 12, 2000 : Tel. No. (703) 305-1679
For a Patent for : Date: January 30, 2004
METHOD AND KIT FOR MOISTURIZING
THE SURFACE OF THE EYE

AMENDMENT AND REQUEST FOR CONTINUED EXAMINATION

Commissioner for Patents
Box RCE
Alexandria, VA 22313-1450

Dear Sir,

Applicant submits with this Amendment a Request for Continued Examination. Because the rejection of the claims of this application is presently on appeal, Applicant submits a copy of the Request for Continued Examination to the Board of Patent Appeals and Interferences. Please amend the application as follows.